

Dear Committee Chairs:

I am an Oregon resident, and I am urging you to support HB3824. As both a healthcare worker and consumer in the state, allowing physical therapists to order diagnostic imaging and durable medical equipment would improve access to care and facilitate prompt diagnosis for all who need it.

Within the current medical landscape, if I were to see my PT for an injury and they determine I need imaging or DME like crutches, I would have to make another appointment with either my PCP, urgent care, or go to the ER (at a high cost to me). This dramatically increases the time and money I must spend on and in the medical system, all for something that my PT is perfectly equipped to manage. Obtaining a prescription for imaging directly from my physical therapist would save me time and money. At least thirteen other states already allow physical therapists to provide this level of care and given their doctoral level training in anatomy, pathology, and differential diagnosis, it is appropriate and in-line with established practice.

Furthermore, I hold a position as a Physical Rehabilitation Aide in a nonprofit hospital. I see firsthand the extra steps hospitalists, case managers, nurses and patients must go through to get patients the equipment and services they need. Physical therapists will complete an extensive evaluation of a patient's mobility and home-set up. They will then provide evidence-based suggestions for medical equipment that decrease the risk for re-hospitalization after the patient discharges. Ordering and obtaining this equipment are often a primary concern of these patients. HB3824 will fast-track this process while ensuring patients confidence and trust in the healthcare system.

A Doctor of Physical Therapy completes rigorous doctoral-level training specifically designed for musculoskeletal assessment and management. This education includes:

- **Extensive anatomy courses:** Extensive training in musculoskeletal, neuromuscular, and cardiovascular systems through multiple semesters in cadaver labs and clinical practicums
- **Advanced Clinical Reasoning:** Comprehensive training in differential diagnosis, clinical pathology, and evidence-based assessment frameworks
- **Validated Clinical Decision Rules for Imaging:** Specific education in applying protocols like the Ottawa Ankle Rules, Pittsburgh Knee Rules, Canadian C-Spine Rules, and NEXUS criteria to determine when imaging is warranted.

- **Imaging Interpretation:** Coursework in diagnostic imaging, including radiography, MRI, CT, and ultrasound, with training in recognizing red flags requiring immediate physician referral.

Doctor of Physical Therapy are more than qualified to administer the practices within this bill. **Supporting HB 3824 in its entirety ensures Oregonians have access to safe, effective care from licensed providers while aligning our state with national best practices.**

There have been instances in my clinic where a therapist will observe a musculoskeletal issue requiring imaging. Rather than being able to directly order these images immediately after the visit, patients must set up an appointment with their PCP or walk into another medical facility to receive imaging. This can have drastic negative effects on the patients' condition and wellbeing. Allowing physical therapists to order diagnostic imaging will improve the efficiency and access of healthcare in our State.

Lastly, I urge you to bring Oregon in line with 46 other states and the Federation of State Boards of Physical Therapy to make the practice of dry needling by a certified and licensed physical therapist legal in the state for the following reasons:

- Dry needling has been practiced by physical therapists since the 1990s with extremely low adverse event rates (less than 0.1% according to multiple large-scale studies), and PT liability insurers report no increased claims related to this practice.
- Physical therapists receive comprehensive doctoral-level anatomical training, with the Federation of State Boards of Physical Therapy confirming that 88% of competencies required for safe dry needling are in accredited DPT curricula.
- Multiple Supreme Courts in other states have affirmed that dry needling is distinct from acupuncture and properly within physical therapy scope, recognizing that health professions naturally have overlapping practices that benefit patient choice.
- In our current healthcare climate where Oregonians struggle with access to care, allowing qualified physical therapists to perform dry needling would increase availability of this evidence-based intervention.

For these reasons, I ask that you please support this bill in its entirety.

Thank you for your time and consideration.

Signed, Brennan DeGarmo